## PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective January 1, 2003

13158-ECIP

| CLAIMS AS FILED - PART I (Column 1) (C   |  |   |                 |                                       | (Column        | 2)              | SMALL E           | OR                     | OTHER THAN OR SMALL ENTITY |                     |                        |
|--|--|---|-----------------|---------------------------------------|----------------|-----------------|-------------------|------------------------|----------------------------|---------------------|------------------------|
| TOTAL CLAIMS   |  |   | 1-2             |                                       |                |                 | RATE              | FEE                    |                            | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED    |                                       | NUMBER EXTRA   |                 | BASIC FE          | -                      | OR                         | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | √3 minus 20=    |                                       | * 48           |                 | X\$ 9=            | 432                    | OR                         | X\$18=              | •                      |
| INDEPENDENT CLAIMS   |  |   |                 |                                       | * 7            |                 | X42=              | 336                    | OR                         | X84=                |                        |
| MU   | LTIPLE DEPEN                                   | DENT CLAIM P                              | RESENT          |                                       |                |                 | +140=             |                        | OR                         | +280=               | ę.                     |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |                 |                                       |                | TOTAL           | 1143              | OR                     | TOTAL                      |                     |                        |
| CLAIMS AS AME  |  |   |                 | ENDED - PART II                       |                |                 |                   |                        | y                          | OTHER               |                        |
|  | •  | (Column 1)                                |                 | (Column                               |                | olumn 3)        | SMALL             | ENTITY                 | OR                         | SMALL               |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | R PI           | RESENT<br>EXTRA | RATE              | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus           | **                                    | =              |                 | X\$ 9=            |                        | OR                         | X\$18=              |                        |
|  | Independent                                    | *   | Minus           | ***                                   | =              |                 | X42=              |                        | OR                         | X84=                |                        |
| L  | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DE      | PENDENT                               | JLAIM          |                 | +140=             |                        | OR                         | +280=               |                        |
|  |  |   |                 |                                       |                |                 | TOTA              |                        | OR                         | TOTAL               |                        |
|  |  |   |                 |                                       | a) (0          |                 | ADDIT. FE         | Ē <b>L</b>             | 10                         | ADDIT. FEE          |                        |
| _  |  | (Column 1)<br>CLAIMS                      |                 | (Column<br>HIGHES                     |                | olumn 3)        |                   | T Appl                 | 1                          | <del></del>         | - ADDI                 |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                 | NUMBE<br>PREVIOU<br>PAID FO           | ER P           | RESENT<br>EXTRA | RATE              | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | * .                                       | Minus           | **                                    | =              |                 | X\$ 9=            |                        | OR                         | X\$18=              |                        |
|  | Independent                                    | *   | Minus           | ***                                   | =              |                 | X42=              |                        | OR                         | X84=                |                        |
| -  | FIRST PRESE                                    | ENTATION OF M                             | IOLI IPLE DI    | PENDENT                               | CLAIIVI        |                 | +140=             |                        | OR                         | +280=               |                        |
|  |  |   |                 |                                       |                |                 | TOTA<br>ADDIT. FE |                        | OR                         | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                |                 | (Colum                                | n 2) (C        | olumn 3)        | ADDII. FE         |                        |                            | ADDIT: 1 CC         |                        |
|  |  | CLAIMS                                    | 1               | HIGHE                                 | ST             | Oldivill O/     | l —               | ADDI-                  | 1                          |                     | ADDI-                  |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT           |                 | NUMBI<br>PREVIOU<br>PAID F            | USLY           | RESENT<br>EXTRA | RATE              | TIONAL                 |                            | RATE                | TIONAL                 |
|  | Total  | *   | Minus           | **                                    | =              |                 | X\$ 9=            |                        | OR                         | X\$18=              |                        |
|  | Independent                                    | *   | Minus           | ***                                   | =              |                 | X42=              |                        | OR                         | X84=                |                        |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |                                       |                |                 |                   |                        | UR                         |                     |                        |
|  | (f. n  |   | 41-             | tuna A                                | 90)* in1       | .n. 2           | +140=             |                        | OR                         | +280≈               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1. |  |   |                 |                                       |                |                 |                   |                        |                            |                     |                        |
|  | The "Highest Nu                                | mber Previously P                         | aid For" (Total | i or independer                       | nt) is the his | gnest numbe     | er tound in the   | appropriate bo         | X IN C                     | oiumn 1.            |                        |